Nam	e of Pers	son Filing Document:
You	r Address r Citv. Sta	s:ate, Zip Code:
You	r Telepho	ne Number: Number (if applicable):
Atto	rney Bar	Number (if applicable):
кер	resenting	Self or Attorney for
		SUPERIOR COURT OF ARIZONA MARICOPA COUNTY
In the Matter of		of Case Number: PB
		PETITION FOR APPROVAL OF ☐ FINAL ACCOUNTING AND/OR
A De	eceased P	Person FEE STATEMENT
TH	E PETI	TIONER STATES UNDER OATH AS FOLLOWS: NS: For approval of accounting, put a check mark in boxes 1, 2 and complete number 1:
1.		This is the final accounting for this estate, and this accounting covers the period from (date) to (date).
2.		Attached is a correct statement of all financial dealings I had as Personal Representative of the Estate. The summary of all financial transactions are fully described, itemized, and summarized on the attached pages. I request that the Court enter an order approving this final accounting. (Be sure to attach the accounting.)
INST	ructio	NS: For approvals of fee statements, put a check mark in box number 3:
3.		Attached is a copy of the Fee Statement for which I request approval too. (If you check this, attach the Fee Statement.)
		SIGNED
		Subscribed and sworn to before me this day of, by Petitioner.
		NOTARY PUBLIC:
		My Commission Expires:

FOR CLERK'S USE ONLY